PTC/SB/31 (01-08)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES	Docket Number (Optional) TNW-10002/29
In re Application of Warren S. Taranow	
Application Number 10/791,948-Conf. #4130 For VACUUM-SECURED ORTHOTIC, PROSTHETIC, AND OTHER BODY WORN DEVICES	
Art Unit	Examiner
3772	T. R. Patel
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 510.00	
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the	e fee shown
above is reduced by half, and the resulting fee is:	\$255.00
A check in the amount of the fee is enclosed.	
x Payment by credit card.	
The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.	
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>07-1180</u> . I have enclosed a duplicate copy of this sheet.	
A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.	
WARNING: INFORMATION ON THIS FORM MAY BECOME PUBLIC. CREDIT CARD INFORMATION SHOULD NOT BE INCLUDED ON THIS FORM. PROVIDE CREDIT CARD INFORMATION AND AUTHORIZATION ON PTO-2038.	
I am the applicant /inventor.	/John G. Posa/
<u>-</u>	Signature
assignee of record of the entire interest. See 37 CFR 3.71, Statement under 37 CFR 3.73(b)	John G. Posa
is enclosed. (Form PTO/SB/96)	Typed or printed name
x attorney or agent of record.	
Registration number 37,424	(734) 913-9300
attorney or agent acting under 37 CFR 1.34.	Telephone number
Registration number if acting under 37 CFR 1.34.	September 2, 2008
	Date .
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	
*Total of1 forms are submitted.	